

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Applicant: Mikhail I. Papisov

Application No.: 09/634,320 Group: 1635

Filed: August 9, 2000 Examiner: Zara, Jane J.

Confirmation No.: 5525

For: DRUG-CARRIER COMPLEXES AND METHODS OF USE
THEREOF



CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
12-23-03	<i>Melissa Bertolino</i>
Date	Signature
<i>Melissa Bertolino</i>	
Typed or printed name of person signing certificate	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Reply for filing in the above-identified application.

[X] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)

(COL. 2)

(COL. 3)

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	15	MINUS	* 96	0
INDEP	6	MINUS	** 25	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

* not fewer than 20
** not fewer than 3

SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 9	\$ 0
X	\$ 43	\$ 0
+	\$ 145	\$ 0

TOTAL = \$ 0

OTHER THAN
SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 18	\$
X	\$ 86	\$
+	\$ 290	\$

TOTAL = \$ 0

-2-

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for three month Extension of Time	\$	<u>475</u>
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>475</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Mary K. Murray
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Concord, Massachusetts 01742-9133

Dated: December 23, 2003